

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>MM</i>	<i>67814</i>	<i>7/8/65</i>
O.I.P.E. CLASSIFIER	<i>SS</i>	<i>68971</i>	<i>7/3/65</i>
FORMALITY REVIEW	<i>SS</i>	<i>68971</i>	<i>3/1/66</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	
Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
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41	✓
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45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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